

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Monty Ray Souther

Write the full name of each plaintiff.

VA RUSSIAN China
-against-

DONALD TRUMP

SERETBRIAN OPERATIVES

JOANNE C Smith

~~USA~~ CATHOLIC Church

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

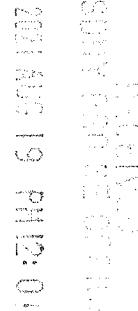
CV

(Include case number if one has been assigned)

COMPLAINT

Do you want a jury trial?

Yes No



NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

Federal Question

Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

Freedom of Religion - phone
tapped - GPS tampered with

B. If you checked Diversity of Citizenship

1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, _____, is a citizen of the State of
(Plaintiff's name)

(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of _____

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, _____, is a citizen of the State of
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of _____.

If the defendant is a corporation:

The defendant, Donald Trump, is incorporated under the laws of the State of NY, Washington FL and has its principal place of business in the State of NY, FL or is incorporated under the laws of (foreign state) _____ and has its principal place of business in US.

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

~~Monty Ray Smith Soutner~~
First Name: ~~Monty~~ Middle Initial: ~~RAY~~ Last Name: ~~Smith Soutner~~
Street Address: ~~Burgoo Ct~~ Burgo Ct
County, City: ~~Havelock~~ NC Zip Code: ~~28832~~
Telephone Number: ~~828 366 5458~~ Email Address (if available): ~~Rush.mn@hawcbs.com~~
~~MOSHA.Soutner1@qmail~~

B. Defendant Information

(SEE ATTACHED)

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

<u>Donald TRUMP</u>	First Name	Last Name	
<u>Ex President</u>	Current Job Title (or other identifying information)		
	<u>NY Trump Tower</u>		
	Current Work Address (or other address where defendant may be served)		
	County, City	State	Zip Code

Defendant 2:

<u>CATHOLIC CHURCH</u>	First Name	Last Name	
<u>CATHOLIC CHURCH</u>	Current Job Title (or other identifying information)		
	Current Work Address (or other address where defendant may be served)		
	County, City	State	Zip Code

Defendant 3:

<u>Russia</u>	First Name	Last Name	
	Current Job Title (or other identifying information)		
	Current Work Address (or other address where defendant may be served)		
	County, City	State	Zip Code

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

<u>Bill & Hillary Clinton S</u>

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

Defendant 2:

<u>STATE Dept</u>	<u>Last Name</u>
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Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

Defendant 3:

<u>First Name</u>	<u>Last Name</u>
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Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

China

Defendant

Russia

Catholic Church

JOANNE Smith

VA

SerBin OPERATORS / Russia

DONALD TRUMP

Defendant 4:

First Name	Last Name	
V.A.		
Current Job Title (or other identifying information)		
Current Work Address (or other address where defendant may be served)		
County, City	State	Zip Code

III. STATEMENT OF CLAIM

Place(s) of occurrence: FOR over 2 years

Date(s) of occurrence: the person or persons unknown

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

to me have placed a Audio implant
to control Behavior against my will
there are people who know of what
I speak - I HAVE BEEN ORGANIZED

I'm a 100% par who suffers from PTSD
Along with CRPSI plus as a result
the Trumpster have harassed
me

Doctors at the VA told me
(I have a cancer that there is no known
cure I went to a Dr in OR who
let Student Doctor use me in a CBRP
then he told me that "you owe
it to us to let us work on you

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

I can't sleep - constant Raining
they use phsic Tethneks
use med marrakech
I HAVE pain every day For 70+ years
I have foot pain that's constant

IV. RELIEF

State briefly what money damages or other relief you want the court to order.

I want my PASSPORT So I
can go home to ISRAEL

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated <u>Aug 19 2021</u>		<u>R</u>	<u>Mosha R Souther</u> Plaintiff's Signature
First Name <u>Monty</u>	Middle Initial <u>R</u>	Last Name <u>Souther</u>	
Street Address <u>Homeless</u>			
County, City <u>MS</u>	State <u>MS</u>	Zip Code <u>39001</u>	Email Address (if available) <u>Mosha.Souther@grms.us</u>
Telephone Number <u>(662) 232-1234</u>			

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

Yes No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.